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THE CHRONICLE

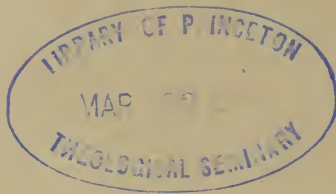
OF THE

LONDON MISSIONARY SOCIETY



1914

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Chronicle

OF

The London Missionary Society

EDITOR: BASIL MATHEWS, M.A.

L.M.S.
Hospital Week
February
8-15

“Go, and do thou likewise”

“Which of these three, thinkest thou,” asked Christ, “proved neighbour unto him?” He said, “He that showed mercy on him.” And Jesus said unto him, “Go, and do thou likewise.”

THE roadsides of the world are full of the fallen and wounded, and those that have no helper. Sick and lame and blind and afflicted in body and in soul, they call for pity and for succour, and alas! too often they call in vain.

For the modern world is very busy and intent upon other things than the care of the distressed. And the modern church is not unfailingly responsive to the call of the needy.

In the heart of Africa they lie, and in the walled cities of China, and on the plains of India; poor, tormented, diseased bodies of men, women, and little children, the brethren of the Lord Jesus, awaiting the merciful touch of the Great Physician who set the seal of His praise on the work of the Good Samaritan “who was moved with compassion, and came and bound up his wounds . . . and took care of him.”

The medical missionary of the Church to-day is the Good Samaritan, not in parable, but in fact.



From the picture by

THE GOOD SAMARITAN

[Harold Copping]

Infant Life Saving

By
Eleanor W. Mitchell, M.D., B.S. (Lond.)
of Hong-Kong

A SHORT account of the growth of the maternity work in connection with the London Mission hospitals in Hong-Kong will reveal some of the benefits that have come to the women of China from the introduction of Western medicine, and indicate the opportunities for fully qualified nurses and medical women from the West to advance the cause of Christian philanthropy in the immense and populous land of China. The London Mission medical work in Hong-Kong will always be associated with the name of a woman; for the foundation of the Alice Memorial and Affiliated Hospitals was due to the young English wife of that well-known Chinese gentleman, Sir Kai Ho Kai.

After her early death the first hospital of the present group was erected in her memory, twenty-seven years ago; and in this building the first women patients were tenderly nursed by a Chinese lady, a devoted and large-hearted woman, who, though the mother of fifteen children, yet found time to attend daily the hospital to wash and dress her few helpless patients; and to

act as interpreter when the doctor made his visits.

Three years later the L.M.S. sent out to this centre the first European matron, Mrs. Stevens, who had received her training in nursing and midwifery in Edinburgh and the Rotunda Hospital.

The great need for scientific midwifery work in China created in Mrs. Stevens an ardent desire to train women according to Western standards to attend their sisters in their homes in their hour of need. Disappointment met her at the outset. Not only was nursing, as it is known in the West, non-existent in China, but there was absolute unwillingness on the part of Chinese women to be trained to care for

the sick, it being considered an abomination to help or even to touch a sick person.

After two years in the Alice Memorial Hospital the women's work was transferred to the Nethersole Hospital, which had recently been erected in the London Mission compound, where there were two wards for women and children, bright and cheerful compared with the quarters they had vacated.

Six years from its foundation the work had made such progress that Mrs. Stevens



THE ALICE MEMORIAL HOSPITAL, HONG-KONG

was successful in finding her first nurse probationer—the first, so she claimed, in South China.

This girl had to endure much hardship and opposition, and many were the tears shed by her and for her.

She was called by every vile name, her ministry to the sick was looked upon with abhorrence by her countrymen, and many even of the native Christians had no faith in or sympathy with her work.

That this antagonism was lived down is sufficient evidence of the proved value of the work.

In the Nethersole Hospital a small room with one bed had been set apart for maternity cases, but at first its occupants were few and far between, owing largely to the deep-rooted belief of the Chinese that a hospital was a place of last resort in cases of illness.

That such an institution might be utilised for the normal physiological process of child-birth was an idea which they were slow to grasp.

In the year 1900 the maternity cases treated in this small room totalled seventeen, and the erection of a small bungalow was contemplated where women might come for treatment who feared the name "hospital" and any association with the sick.

While funds were slowly being collected for this purpose, some Chinese gentlemen, in conjunction with Sir Kai Ho Kai, offered to erect a building more commodious and convenient than had been contemplated. They also offered to provide the salary of a lady doctor to take charge of this branch of the work. As the result of this offer the Alice Memorial Maternity Hospital, a building with a ward of ten beds, a

labour room, two private wards, and accommodation for nurses, etc., was opened in 1904, with a lady doctor in charge. From the commencement the Chinese have thoroughly appreciated the advantages of this hospital. Many of the wealthier Chinese women show their interest in a practical manner by generous gifts of money and of clothing. Some of them have further proved their faith in the institution by coming as patients to the private wards.

The poorer classes—the wives of boatmen and coolies—come in ever-increasing

numbers to the general ward. In 1912 the cases treated as in-patients numbered 489, and out-patients 418.

It is doubtful if any one can truly estimate the benefits that this hospital has conferred upon the Chinese, but no one can appreciate it more fully than the doctor whose

days are spent both in the hospital and in the native homes, and who can thus compare the conditions in the crowded quarters and stifling atmosphere of the lower levels of Hong-Kong, where the poorer classes live, with the comparative coolness, quiet, and cleanliness of the maternity hospital.

Some of the experiences of the doctor in visiting among these homes may be of interest in illustrating this point.

A curiously thrilling experience in the earlier days of one's practice is a night visit among the boat population. Many thousands of women live all their lives on the water, their homes the sampans and junks which crowd the large harbour of Hong-Kong. The doctor is rowed out in



THE DOCTOR'S HELP IS NEEDED ON THE JUNK

a small boat to the junk where her help is needed.

Hands stretched out in the darkness haul her on board and lower her into the hold, where, crawling on hands and knees into the tiny cabin, she finds her patient lying on the floor.

So small are the quarters, there is only room for herself, her nurse, and the inevitable wooden tub of water, the roof being so low that she cannot even kneel upright. In this cramped posture, by the light of a few wax candles, operations that would be difficult in a well-equipped hospital have sometimes to be performed. The relief to the doctor can be imagined when in some instances the patient, after much persuasion, consents to be moved in an ambulance to the foreign hospital.

At another time the patient is sought in

a native lodging-house, all the rooms of which are crowded with half-dressed Chinese coolies. Amid this confusion and babel of tongues the woman is found in a cubicle only partly curtained off from the main room, alone with her infant in this crowd of men; a stranger in a strange land, speaking an unknown tongue, having only a few hours since arrived from a foreign port.

Occasionally a journey is taken from Hong-Kong into the country districts on the mainland, where ancient superstition and ignorance still reign supreme, and where they are never more in evidence than at cases of child-birth.

After a journey by launch, followed by a tramp along the shore or by winding paths into the interior, passing *en route*

one or more native villages with the usual accompaniment of barking dogs and grunting pigs, the patient's house is at length reached. Being a difficult case, the most experienced midwife of the old order has been engaged—a dirty old crone almost blind, who walks with the aid of a long stick, and looks like one of the pictured witches of the Middle Ages. A striking contrast she appears to the trim young nurse by the doctor's side, and still more marked in her inability to deal with the case.

To the wearied doctor after such an experience the consciousness of having been privileged to render aid where it was so much needed and the grateful thanks of the patient and her friends furnish an abundant reward for the trials and difficulties undergone.

The work

being done in the maternity hospital forms but a portion of the developments which have taken place since Mrs. Stevens saw her visions. Today in various parts of China, the Federated Malay States, and countries farther afield, there are young Chinese women who after a training of three years or more in general nursing and midwifery in the Nethersole and Maternity hospitals, and the passing of an examination before a Local Government Board, have gone out to devote their lives to the ministry of helping their countrywomen. Of these, ten are employed by the Hong-Kong Government to work among the poor of the Colony, under the supervision of the L.M.S. hospital doctors.



CHINESE NURSES WITH ELEVEN BABIES UNDER A WEEK OLD

These ten alone in 1912 attended no less than two thousand cases.

Who can estimate the influence of these workers on the Chinese population?

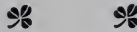
By constant reiteration something of the elementary principles of hygiene, laws of health, and the care of infant life must sink into the minds of the people. Nor has their influence ended here. With but few exceptions these women are members of Christian churches, and in not a few instances the effect of their moral influence in the homes which they have visited has been as striking as the benefits conferred by the efficient treatment of their patients.

Anticipating still further development

of the nurses' training department, the same generous Chinese friends have erected and furnished another building to serve as a home for the nurses during their years of training.

A few years' experience of such work would convince even the most sceptical that there is no more certain entry into the homes of the non-Christian world than through the avenue of medical-mission work.

As certain as the entry into the homes, so sure and direct is the way to the hearts of the women; for to be the sharers of human joys and sorrows is to establish a bond of sisterhood in which racial distinction sinks into insignificance.



“We never knew what love was”

THE lady doctor was out in camp some twelve miles from her station in S. India. All day long a stream of suffering women and children sought her at the door of her tent, and all day long they received her skilled and loving attention. In the evening, when the sun was setting and she had seen the last of her patients for the day, she began to pack up her drugs and instruments preparatory to returning home in the cool of the night. Looking up, she saw four men carrying a burden towards her little tent and waited to see what new claim on her attention this might be. Presently they laid at her feet an outcaste man, the son of one of the bearers, in the grip of cholera. What was she to do? I have no need to tell you what she did: love dictated that, and you have already foreseen what happened. Putting away all thought of returning home, she turned to this poor outcaste stranger to see if by any means she might save his life. All night long the woman doctor fought death in an unequal combat! All night long there was no ministry so repulsive but love hallowed it, and all night long there was no service so lowly that love did not stoop to it.

In the dawn he died, and as the morning broadened into sunrise the respectable Hindus of the village, the men whose women and children she had been seeking to comfort and to heal during the whole of the preceding day, came out from their homes and saw what had taken place. They spurned the doctor, because having touched

their women folk she had also touched the filthy body of an outcaste man. They declared that never again should she be welcomed in their village or allowed to touch their people. Even the father of the dead man lifted up the corpse of his son and carried it away without so much as saying “Thank you.” The woman doctor was left to make her way home over twelve miles of roadless country, with weary limbs and aching head and a heart deeply wounded, for she said, “I thought to have opened a door of usefulness, but I seem to have closed one, and to have wasted my night's labours.”

But in six months the family of the dead man—the man whom she had sought to cure—were at the feet of her brother, the missionary, pleading to be taken under his care and taught with a view to entering the Christian Church. “Why have you come?” said he, not unnaturally; to which they replied: “We have come because we have seen what love can do. We never knew till then what love was. You thought that we did not care because we did not speak, but our hearts were too full for speech. We want to belong to you.”

The result was that in a short time the missionary in charge of the station was able to baptize a thousand people in that village, and a little later could report that that new congregation had provided twelve Christian workers—evangelists, teachers, and Bible-women.

W. G.

Our Medical Missions



DOCTORS
41.



HOSPITALS
56.



**DIS-
PENSARIES**
41.



NURSES
12 British and
many native.



Tending an In-patient

**IN-
PATIENTS**
15,183
last year.



Interviewing Out-patients

**OUT-
PATIENTS**
297,725
last year.

Overcrowding in Wuchang

By Dr. Ruth Massey

WE have now reached the end of another year's work, and without exception the heaviest we have had in hospital. For weeks and weeks we have been crowded to our very utmost capacity, sometimes in the warm weather with three or four cots on the verandah in addition to those on the tubercular verandah. We have got weary of having to turn away patients who have come pleading for admission, and I have had to give the preference to country folk and really serious cases from the city. But when it comes to country cases who have come many days' journey, what is one to do? I remember spending at least half an hour with a nurse one day discussing every possible plan by which we could squeeze another patient in. She had come, so she said, several days' journey by boat in hot weather and had nowhere to stay. To send her to an inn seemed criminal, for she was in a condition which made her a source of danger to all with whom she came in contact. Brutal though it seemed, for she could hardly sit up, I tried to persuade them to go across the river and try the Hankow and Hanyang Hospitals, but I dared not press that, for I felt perfectly certain they would not be able to take her in. So at last, as the Chinese say, "We thought a plan" and admitted her.

Another day, towards evening, the Gate-keeper drew my attention to two blind women sitting on the opposite doorstep. He said they had come from the country, and he told them it was not the day for seeing patients, and they could not afford the extra fee for out-of-hours patients; but they refused to go. I tried to stiffen my back, and give due regard to the congested state of the hospital, and remarked I was sorry for them, but the weather was warm and they must sleep on the street. However, the sight of them was too much, and I went across the street to look at them, and found both of them needed operation, and in my heart I relented. But I knew the protest and ridicule it would raise if I so disregarded hospital rules and order, and returned to hospital to leave them a little longer in doubt. Then I suggested that there were still no in-patients in the out-patient waiting-room, and so finally sent to call them and tell them that if they preferred wooden benches to the street they might come in, and, if any patient left next day, they should have beds. They gratefully accepted the offer, and remained there till the middle of the next day, when we managed to empty two beds.

Convert Hū

of the Siaokan Leper Asylum, Central China

By
Henry Fowler
L.R.C.P. & S.

*I, laid beside thy gate, am Lazarus ;
See me, or see me not, I still am there,
Hungry and thirsty, sore and sick, and bare.*



ONVERT Hū passed away in his sleep last night; we bury him in an hour's time."

Such is the message which comes to us early this morning. As we hasten to speak to the message-bearer the mind rapidly recalls many an incident connected with our good friend Hū Yin Lin the leper.

He was in a sad condition when he sought admission, three years ago, to our Asylum. Tall, covered with rags, dirty and disease-

laden, more animal than human, he threw himself down at our feet in true beggar fashion and called upon our sense of pity and benevolence to come to his aid. What could we do but take him in ?

A good wash-up, clean clothes, a full meal, a comfortable bed—these physical comforts help considerably to the well-being and satisfaction of a man—they make even a leper glad! Smiles of gratitude lit up the ulcerous, swollen face of the new-comer and the deformed hands met together in acknowledgment of such unwonted favours.

Ever since his disease had incapacitated him for work and he had been cast out of family and clan, every hand had been against him. He had had literally to fight at times, as he afterwards told us, for the roughest of food and the scantiest of clothing. To get rid of the supplicating, filthy leper-beggar from their doors, people had thrown remnants of food at him as to a dog. With this he would shamle off to the nearest temple portico and there rest till nature again demanded the search after food. What wonder if the higher human instincts vanish under such conditions !

It is a belief, however, of "true lovers, patrons, and servants of mankind" that given a congenial environment the most degraded may become upright and noble. Certainly under kind treatment, cleanliness,

and regular habits the latent good in poor leper Hū was developed.

We found him to be a man of more than usual intelligence, with a rich vein of humour and great brotherliness.

We took a particular liking to the big fellow and noted daily with thankfulness the putting off of the dirty habits, the lifting up of the hang-dog head, the bright glance of the eye, the frank smile of recognition—in other words, the immergence of the animal into the human.

Christian instruction is given daily in our Asylum, and the wonderful news heard then opened up a fresh desire in the mind of our latest inmate. His whole being went out to the graciousness of the Gospel message of hope and love. Within a month he had begun to learn to read the New Testament for no other object than that he might, with his own eyes, see the very truths and teaching which were constantly being discussed around him. He astonished us with his rapid progress. In due course he joined the class of probationers for baptism and church membership and later on was qualified to be called "Convert Hū."

Throughout his residence with us he remained a quiet, happy, steady Christian character, helpful to his fellows, inspiring confidence and calling forth comradeship on the part of the most sullen and unlikely.

By the choice of his fellows he was elected captain of his ward, and to his dying day was known among us as a reliable man, kindly, and full of good deeds.

We find that our large family of lepers is particularly sensitive to climatic conditions. The long, hot, dry summer and autumn have as usual played havoc with not a few of our inmates. It brought on a severe form of leprous keratitis to poor Yin Lin which rapidly caused total blindness. It has been pitiable to see him moving about with a stick, being guided round difficult corners by some friendly inmate. Yet the sightless eyes and disfigured face always smiled a "thank you" for every little kindness received. What a lesson to some of us who become blunted, as we say, to such sensitiveness by what we call rougher winds and stress and strain of work !

This blindness, although a late symptom of leprosy, does not necessarily mean a rapid break-up. In Hū Yin Lin's case, however, the invasion of poisonous leprous toxins was so severe that death was clearly seen to be

near. We said good night to him yesterday and received his feeble but cheery "Thank you, doctor," and now deliverance has come and he has gone in to see the King who he delighted to think of as pitying the leper and of some day making him whole every whit.

What can our thoughts be at the moment but those of profound gratitude to the friends who help us to keep open door to such as poor Hü the leper?

Robert Louis Stevenson in his defence of Father Damien pictures "the monstrous sum of human suffering by which one engaged in leper work is surrounded." He would have his reader believe that working in a

Yonder, in the corner, covered by his warm quilt, is a dear fellow who for over six years has been gradually dying.

He is the only son of his mother and she is a widow.

"Speak to him," says our visitor. A curiously distorted smile passes over his face as he hears the doctor's voice.

"How are you to-day, younger brother?"

"Thanks be to God's grace I am free from pain to-day. Last night I was in great distress, but the medicine you gave me relieved me greatly, and now I have peace of heart. Doctor, when do you think I shall die?"

"Are you quite ready and wanting to go, Yuen Shang?"

"Oh, yes! As I lie here I keep saying to myself, I shall soon be rid of this rotten body. I shall see the Heavenly Father, I shall see Jesus, the friend of the helpless leper."

"God watch over you and bless you, Yuen Shang, and carry you safely home. I hope you will have no further pain. Mind and look out for me up yonder."

"Yes, doctor, I'll be looking for you and your kind wife."



Photo by,

IN THE LEPER CHURCH, SIAOKAN

[Bernard Upward

lazaretto is "an ordeal from which the nerves of a man's spirit shrink even as his eye quails under the brightness of the sun." He has demonstrated that it is a pitiable place to visit and a hell to dwell in.

And indeed he is right in part, for however bright, clean, and surrounded by Christian influences a Leper Asylum may be, there is always present an atmosphere of affliction, disease, and physical despair.

"Show me some of your rotting brethren," said a recent visitor to us. Without waiting to point out the conveniences and efforts for the well-being of our poor fellows, which are usually the first things friends desire to see, we took him straight to the ward for the dying. It was nearly full. There they lay, "the butt-ends of human beings, almost unrecognisable, but still breathing, still thinking, still remembering."

We instinctively turn to another patient, feeling that the chastening hand of God works on the leper as on many an invalid in the homelands, producing fruits of righteousness which put to shame the attainments of those who have not passed through the school of suffering. Surely we say subconsciously the testimony of the leper is to be believed when he speaks of the comforts of the Christian religion. Not a few, whom we have known intimately, could send this message to Christian: and non-Christians everywhere. "Our light affliction, which is but for a moment, worketh for us a far more exceeding and eternal weight of glory, while we look not at the things which are seen, but at the things which are not seen."

But our visitor has turned also to another part of the ward. He is looking with troubled eyes at a very unlovely sight.

"How old is this man?" he asks.

"Just forty only."

"Why, he looks seventy!"

"Nose, mouth, sight, all have been, as you see, destroyed by the ravages of the lepra bacillus, but within that frail body there is a soul purged and beautified."

"Has the man been long in the home?"

"Yes, we have known him intimately for fourteen years. We regard him as our friend. He has helped and counselled us through the years, and should he pass away we shall sadly miss him."

"Well, I can't understand how God Almighty allows such a worn-out, dreadful thing to exist. Can't you just give him a dose of morphia and let him sleep peacefully away?"

We turn to the questioner and in a few words indicate the history of the case before us.

The man, we say, must be his own apologist for living.

We tell of his early strength and vigour; of his home and family life in the days of his prosperity. We endeavour to express something of the poor fellow's feelings when he discovered that he was a leper—a thing henceforth to be shunned, "doomed to a life-time of dressing ulcers and stumps."

The heart-rending cry of the old Hebrew prophet finds an echo still in the experience of many of our inmates. "Before me continually is sickness and wounds. Why is my pain perpetual and my wounds incurable, which refuseth to be healed?" But it is also true that many learn to say with the Apostle Paul, "I reckon that the sufferings of this present time are not worthy to be compared with the glory which shall be revealed in us."

"It was a painful process through which our poor friend passed, but through it he became purged, bettered, and beautified in soul. Now with patience he awaits the Home-call. Put a question to the man and you will hear nothing from his lips but praise and thanksgiving to God for His untold mercies."

Our visitor is silent as we pass into the bright, open quadrangles. Evidently he is thinking deeply of the wondrous ways of Providence in calling some to suffer and of passing others by.

He says to us at last, with deep passion, "Would to God that our clergy and laymen and others needing to learn some of the mysterious and deep things of life could see with their own eyes what I have just seen."

"Does it mean," asked a recent visitor to our Asylum, "that your lepers, when they enter these gates, bid farewell for ever to a life of usefulness—do they abandon all hope?"

"By no means. Although the fever of incipient disease may be coursing through their veins, and although their extremities may be falling from them, under proper treatment the ravages of the disease may for a time be stayed. Much physical relief can be given to them. Rest, cheerful and light occupation, gentle exercise, and reading are invariably prescribed, often with happy results."

"I suppose these men find some sort of consolation in their new-found religion?" queries our visitor.

"Yes, indeed. *Look around you at these men.* Some are busy reading; others, as you see, are making nets. Could you find such contentment apart from Christianity, do you think?"

"Why, many a heartache, disappointment, and weariness is here swallowed up in happy service for others. Wait a moment and you will perhaps see what I mean. Watch the kindly action of that good fellow to the poor, blind chap next him. Two years ago he was a rank heathen, far advanced in the second stages of leprosy. You could not imagine a more sullen and selfish creature. Now he is a changed man. A miracle has taken place. We feel that that sort of thing is worth working for. It takes much from us—this constant contact with disease—but much is returned to us as we see new hopes born in the lives of our men."

The week of Thanksgiving, Prayer, and Self-Denial (February 8—15) is this year to be specially devoted to the Society's Medical Missions. A list of publications provided for the week has been prepared as an order form and is issued with this number of "The Chronicle." It should be filled up and returned to the Editorial Secretary without delay.

Fighting the Plague

By
J. M. Stenhouse, B.A., M.B., B.C.
of Union Medical Coll., Peking

DR. WU LIEN TEH, Doctor of Medicine of Cambridge University, and Dr. Gibb, of the Union Medical College, Peking, together organised the anti-plague campaign in the Chinese quarter of Harbin. From this plague-ravaged town the district south as far as Tientsin and Peking was rapidly becoming infected. The pneumonic variety of this epidemic, which took its rise apparently somewhere in the wilds of Mongolia, does not depend on rats for its transmission, but spreads rapidly from man to man by direct infection. A glance at the picture showing the interior of an underground Manchurian inn explains the rapidity of spread. The absence of ventilation and the crowding together of the sleepers need no comment. To catch the least bit of the cough of a plague-stricken man was the signal of speedy death.

Dr. Wu, when appointed by the Chinese Government to the work, applied to the Union Medical College, Peking, for help, and Dr. Gibb was associated with his Chinese colleague as co-director. The Union Medical College sent two other members of its staff to Harbin, and one to Chang-Chun, south of Harbin, another to Pao-Ting-Fu, near Peking, while the remaining doctors and students organised the prevention work in Peking itself and Tientsin. This latter

work was of a peculiarly dangerous character owing to the suddenness with which plague arrived in these cities. In Tientsin two of our students lost their lives nobly combating the disease. Fortunately, how-

ever, the first case in Peking was brought to the Union Medical College Hospital, and after death, which occurred in a few hours, plague bacilli were recovered from the blood by Drs. Hill and Wenham. Dr. Wenham and the other members of the staff then in Peking were instrumental in tracing this case to an inn outside the city. This inn was promptly isolated and the recent occupants traced. Fourteen cases in all occurred in Peking, but owing to the prompt action of these medical men and their students the disease was stamped out. Not only were these prompt measures the salvation of

many thousands in Peking, but they were also a most beneficial proof to the Chinese of the worth of preventive medicine. On more than one occasion Yuan Shih Kai has referred to this fact in commendation of medical missions.

The outcome of this has been the establishment in Harbin, under the directorship of Dr. Wu Lien Teh, of an isolation hospital and laboratories to deal promptly with any further outbreak of this most deadly scourge at its very source.

The anti-plague staff in the Chinese town of Harbin consisted of Dr. Wu and



DR. WU LIEN TEH
The organiser of the Anti-Plague Work



WHY THE PLAGUE SPREAD
An Underground Inn in Manchuria

Dr. Gibb, Directors, with two other members of the Union medical staff, in charge of the isolation of "suspects" and "contacts." The town was divided into four quarters, and these were put under the charge of four Japanese trained Chinese medical men. These gentlemen were most zealous in the performance of their duties and vied with each other in a friendly rivalry of efficiency. One of the immediate difficulties which this band had to meet was the burying of the hundreds of dead. Eventually a system of cremation was adopted. Each quarter had its own organisation of disinfecting station, ambulance corps, house disinfecting corps, house-to-house inspection corps, etc. It was this thorough house-to-house visitation throughout the four quarters which, by the grace of God, finally brought us through.

By the time the plague was at its height the people no longer objected to this necessary measure, and even themselves in many cases reported deaths as they occurred in their own households, submitting themselves willingly to the necessary period of isolation in the "contact" waggons. This, however, was not the case at first, when house visitation was carried through with the greatest difficulty, and

many empty houses discovered with bodies hidden either in the roof or in the brick bed, the inmates having already fled carrying infection far and wide.

The arrival of Chinese troops, long expected, was of the greatest assistance in preventing this evasion by contacts of the period of detention. The soldiers themselves, however, came already infected, and it was found neces-

sary to isolate some hundred or so of the men, many of whom succumbed.

The "contacts" and "suspects" were received into a long line of railway waggons, which had been kindly supplied by the Russian Government. Each wagon was fitted with a stove and sleeping-benches, and could accommodate twelve or more persons. Two small isolation hospitals were used for the worst cases amongst the suspects, which cases had almost invariably to be transferred to the plague hospitals proper. In charge of these plague hospitals (which were indeed most deadly places, as no form of treatment was of any avail, *not a single recovery* being reported from the whole of Manchuria and North China) were some of the Chinese qualified men (qualified in Japan or in one of the two Chinese Government schools in Tientsin). One of these gallant gentlemen contracted the disease and succumbed in about forty-eight hours, this being about the average duration of the illness. Mention should be made of one Chinese doctor. He knew nothing of medicine and surgery, but practised the art of healing according to the old-time Chinese methods. Before the advent of Dr. Wu he had been placed by the Chinese authorities in charge of

a building for the reception of plague patients. From his appointment to the end of the plague visitation, a period of about two months, he never flinched from his post of danger, gallantly doing his duty in



DOCTOR INSPECTING A SUSPECT

tending according to his skill the 2,000 odd patients who passed through his hands. As was the case in all the plague hospitals, not one of these 2,000 recovered. According to Chinese procedure he had freely used his puncturing needle on his patients. It is a good omen for the future of medicine in China that this old gentleman, who had done his work so bravely, presented to Dr. Wu this needle as a token that Western preventive medicine was, in his

view, better than old Chinese methods.

At the International Plague Conference, which followed the cessation of the epidemic, the Union Medical College, Peking, was represented by Dr. Aspland and Dr. Hill, the former acting as medical secretary.



The Weekly Penny— or More!

MRS. MIDDLETON, of Ryton-on-Tyne, sends the following valuable suggestion:

"In talking over missionary matters with my husband after service on Sunday last, the idea occurred to me, to have placed in the vestibule of our church a box in which every member might place one penny weekly, this penny to be given over and above any money subscribed to church or missionary cause.

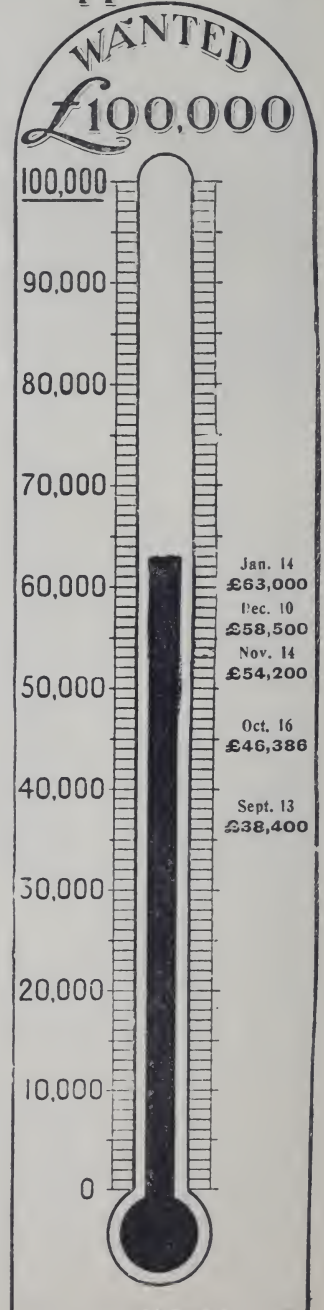
"If a systematic giving of one penny per week, by each member or adherent in every Congregational church throughout our country, were put into practice, the L.M.S. would show a handsome balance at the end of each year, instead of the usual deficit, and this without impoverishing even the poorest member or adherent.

"Let the box be placed in a prominent part of the vestibule with a card above bearing the words '1d. Weekly Contribution for L.M.S.,' so that all who enter may be reminded.

"I would also suggest that the minister of each church announces for a few weeks what the systematic giving of this one penny weekly means; and to urge that it be given regularly, and by every one who enters the church."

The Editorial Secretary will gladly send a suitable lobby box for use in any church where this method of collecting subscriptions is adopted.

The £100,000 Appeal Fund



The Training of Native Helpers

By
Cecil J. Davenport
F.R.C.S.



THE training of native helpers in the mission field is one of the most important branches of mission work.

Especially in connection with medical work, systematic training has in the past been a heavy task on those who have attempted it.

Single-handed, burdened with the urgent claims and responsibilities of hospital work, with the language difficulty to be overcome,

and with the absence of a medical vocabulary or terms in which to express modern medical and surgical knowledge, medical missionaries have found but little time and strength to devote to this all-important work. And what wonder!

Some grand souls have attempted it and fallen in the fight. A few have succeeded, and have lived on in their pupils' lives and labours.

Next to the Gospel of salvation, natives trained in all branches of medical knowledge are the greatest gift that Christendom can bestow on non-Christian peoples, and one which they stand most in need of. When at the same time the trained native is also a Christian the gain is most marked. Foreign medical missionaries cannot hope or expect to be the channels through which healing and help are to be conveyed throughout the length and breadth of countries like India, China, and Africa. Under God's blessing they have let in the Light, shown the Way, demonstrated the Truth. Now it is theirs to commit this knowledge and power to faithful native men and women, who, as an ever-increasing stream, may go forward to take possession of the whole land.

If for a moment we dwell on the fact that over one-half of the human race in the hour of pain, distress, and suffering are helpless and hopeless, while we in our favoured lands are surrounded with able and skilled assistance and every needed

appliance, which are able to bring such comfort and relief in sickness and suffering—if we but pause to think, we must realise our privileges and responsibilities and hear the pleading call: "Come over and help."

In every medical-mission centre some few native helpers are, and have been, trained to a greater or less degree of efficiency. But how infinitesimally small is this supply for so vast a need!

The call to Christendom to-day is to seriously face the situation by united effort and advance, along those lines which will supply the greatest need, and eventually produce the most wide-reaching results, viz. by increasing the training of native helpers, all round.

A most encouraging feature of this question is the fact that the material with which we have to deal is excellent, both to teach and to mould. Our pupils in their work, as a rule, prove to be keen and plodding, careful and self-reliant, tender and capable. The tendency to slackness in maintaining the standard of efficiency largely pervades the native character, and calls for constant oversight; but with Christian principles as the constraining power, this will be overcome.

The photograph reproduced here shows the staff of the Women's Hospital, Shantung Road, Shanghai. These young Chinese women, aged from eighteen to twenty-eight years, after three to four years' training are, each in their own department, well able to dress wounds, administer chloroform, attend to an ordinary maternity case, assist at operations, or do simple dispensing and out-patient work.

Nursing in our men's hospitals is our weakest spot. Social customs in the past have not permitted female attendance in the male wards. This has driven us to use raw, coolie nurses. But even they, in many instances, have developed much skill and tenderness and devotion in their work.

Owing to the wonderful changes that have taken place, it is now possible for foreign lady matrons to take charge of

men's hospitals, and we eagerly welcome this change as a great step along the lines of training.

The late Dr. Pan, of the Shanghai Hospital, was an out-standing example of what local training can produce; and he is typical of many able and valuable colleagues who to-day with us share the joys and difficulties of the great work being done. Dr. Pan for years managed the Men's Hospital in Shanghai, doing all the

missionary bodies, there are some ten schools—scattered between Moukden and Canton—schools to train general and maternity nurses, male and female doctors—schools which are only *more or less* established.

The medical school at Hong-Kong is not classed amongst these, being part of the Colonial University. It has turned out many useful men, and many nurses have been trained by the L.M.S. women's work



NURSES—ENGLISH AND CHINESE—AT SHANGHAI

ordinary medical and surgical work in a way to command the admiration and respect of Chinese and foreigner alike.

It is men and women like these who encourage us to go forward amidst many difficulties, and who, as well-trained workers, may be given to the suffering millions, by the help of the Christian churches.

What steps *are* being taken to give systematic training in medical knowledge in China?

Over and above the one or two medical schools instituted by Chinese and non-

in Hong-Kong. Of the above-mentioned ten schools in all but one—the American Episcopal Mission School in Shanghai—the teaching is given in the vernacular. Strong feeling exists in some quarters that all the fully trained doctors should be taught in English. For the most part these schools are very much under-staffed and are carrying on their work under great and real difficulties.

Our own Society has wisely and vigorously led the way in establishing the Union Medical School in Peking. The work thus begun demands that it should be thor-

oughly maintained. Our medical staff in Hankow have most devotedly battled for



THE LATE DR. PAN, OF SHANGHAI

years with numerous difficulties in order to carry on their school, which to-day is

on a union basis, embracing four different societies.

We thus see that the L.M.S. is well to the front in medical training. But could it not do more?

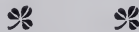
To better accomplish the task of training, it might possibly be advisable to rearrange the work and appointments of senior medical missionaries with a view to better promoting the welfare of this so-needed and important a work.

As an aid to training, the use of textbooks are indispensable. For some years the China Medical Missionary Association has foreseen this need, and has made every effort to prepare for it, by translating and issuing standard medical textbooks in the vernacular.

With help from various quarters, the Association has issued twenty-six different Chinese editions of well-known textbooks, which to-day are available as a basis for all future training.

To sum up: (a) The utility of the work of trained native helpers is incontrovertible; (b) The urgent need for more such trained helpers is evident; (c) The result of past efforts in training has been most successful; (d) The present means to carry on efficient training are most inadequate; (e) The present is the opportunity.

Will all who read this do something to further this great and beneficent work for suffering humanity?



The Mission to Lepers

IN addition to their ordinary work as medical missionaries, several of the Society's doctors have the care and oversight of leper asylums. Such asylums exist at Siaokan, Central China, Almora and Kachwa, North India, and Neyoor, Travancore.

There are also leper homes at Fianarantsoa, Madagascar, and at M'bereshi, Central Africa, supervised by missionaries who are not doctors, but have willingly added this work to their ordinary responsibilities because of the dire need of the afflicted people.

This work among lepers is mainly supported by grants from the Mission to Lepers in India and the East. This mission, which acts in close and friendly co-operation with many missionary societies, has been the means of much blessing in the work of ministering to lepers and their children, not only alleviating

the conditions of those suffering from the disease and presenting the Gospel to them, but in many cases by taking the untainted children, preserving them from the infection. Since 1894 the Mission to Lepers has given over £6,200 towards the building and support of the institution at Siaokan.



Linked by Suffering

THE Aged Blind Men and Women of the North London Homes have sent £2 10s. on behalf of Mrs. Hockett's Leper Settlement in Madagascar. The inmates of these homes devote a Saturday evening in each month to prayer for the lepers, and on each occasion a box is carried round.

Medical Education and Christian Union in Peking

By
Nelson Bitton

VERY few travellers to the Far East fail to spend some portion of their time in Peking, and none of these would fail to see and be impressed by the fine block of buildings in the Hatamen Street which marks the location of the Union Medical College. This outstanding piece of missionary enterprise, which is also a unique example of union in Christian service, has been spoken of repeatedly as the finest thing of its kind in the whole sphere of modern missionary operations. It owes its foundation to the medical enterprise of the L. M. S. in China, and its present position to the readiness of all the missions in North China to co-operate heartily for the furtherance of Christian medical service.

The late Dr. Wm. Lockhart was the pioneer British

doctor to China and the first medical missionary to start work for his Master in Central and in North China. He founded the great Shanghai Community Hospital for Chinese, associated with the L. M. S. and now carried on under the skilful supervision of Dr. Davenport, in the year 1843. At this hospital in the year 1912 no fewer than 1,983 in-patients and 49,923 out-patients were treated. In the year 1861 Dr. Lockhart moved on to Peking, and there established the hospital which has in the course of years become the Lockhart Union Medical College.

In no centre of missionary enterprise

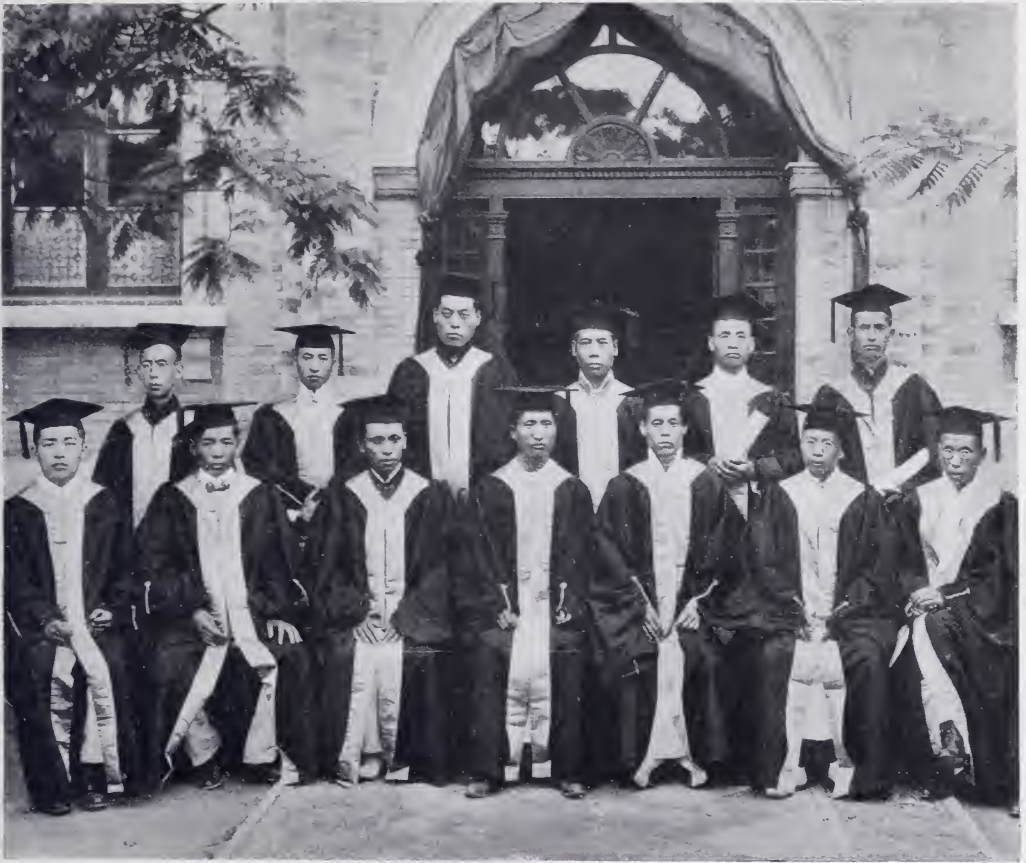
has medical work been more effective than in Peking. Here, where the Chinese contempt of the foreigner—his religion, his trade, his diplomacy, and everything that is his—was at its height, there was displayed the pitying and the saving skill of the followers of Jesus Christ. Surgical cases, in the face of which the Chinese surgeons with their barbarous and ignorant methods were worse than helpless, were treated and cured. Patients, whose lives



UNION MEDICAL COLLEGE, PEKING

had been given up in despair by the best advice their own countrymen could offer, were healed; the blind received their sight, and the poor and outcast of the land were received and aided for the sake of love alone. No wonder the simple Chinese thus helped and healed spoke of the work of the mission hospital as the "diffusion of pity." Thus, even in proud, arrogant Peking, Christian pity, through the service of the hospital, began its supreme work of breaking down the wall of bigotry and opposition, by revealing the heart and hand of God in Jesus Christ.

When the Boxer upheaval in 1900 threatened the very existence of the



GRADUATING CLASS, 1912

Christian Church in all China north of the River Yangtse and wrought desolation throughout the whole province of Chihli, the ground was cleared for a full reconsideration of the work of the missions located there. Three of these missions formed an educational union, each one becoming responsible for a special branch of missionary education, and to the L.M.S. was allocated, in view of its premier position as a medical agency, the work of medical training. Here began the splendid story of the Lockhart Memorial Union Medical College.

The identification of leading Chinese with this great work has been one of the conspicuous features of the institution. It was one of the first and most significant of the visible signs of the healing of the breach between China and the West which the Boxer folly had brought about. Right beside the College in the main street stands the "Von Ketteler" monument, a great

marble arch, erected to mark the murder of a German diplomat in Peking by Chinese, and set for a warning and a reminder to China of the punishment which followed her betrayal of international trust. The College, too, is a reminder of Boxer days, but of another and worthier kind. Here a part of the money which China paid to the L.M.S. for the damage done to property is invested in a standing memorial of forgiveness and love. "You murdered our missionaries, our property was destroyed by you," it seems to say, "but we have been taught by our Master to pray, 'Father, forgive them,' and so in our halting yet sincere way we endeavour in this work to carry out the great commandment, 'Overcome evil with good.'"

Now that it is over and done with, the Christian Church has no cause to regret the Boxer movement; it taught Christian missions, as well as the Chinese, an abiding and a useful lesson.

The societies co-operating for the extension of this work were The London Missionary Society, The American Board Mission, and The American Presbyterian Mission. The L.M.S. erected the building and met the initial cost of this great undertaking. The Medical Missionary Association of London came forward actively to support the scheme,

and the American Methodist Episcopal Mission and the Society for the Propagation of the Gospel also participated in the work. The control of the college was vested in the L.M.S., acting for the united bodies, and Dr. Thomas Cochrane, our well-known China medical missionary leader, became its first dean. The aim of the



AN EXAMINATION

college is "to give to well-educated Chinese students, in their own language, and under Christian influences, as thorough a knowledge as possible of the various branches of medicine and surgery."

How great a success this work has been, in spite of many difficulties, is well known. The support of the late Empress Dowager,

Tsu Hsi, was gained for the institution through well-wishers of the Manchu Court, who had received medical help at the skilful hands of Dr. Cochrane, and a special grant of money made by her towards the building and equipment. A contribution was also promised towards its support by the Chinese Government. The college was recognised by the Board of Education of China, so that its



ARRIVING ON A DOOR



DR. WENHAM AND STUDENTS IN THE OPERATING-THEATRE

graduates go forth recognised by the Chinese Government as fully qualified medical men. Already two years of graduates have passed from the college into the service of China and her needy people.

All the men of these two years professed Christian discipleship. The Christian tone of the College is a most encouraging feature of its work.

On the staff of the college are some fifteen regular lecturers representing some six or seven denominations, and occa-

sional lectures are given by other medical men who assist as time permits. This college rendered meritorious service in combating the devastating and fearful plague which swept over China in 1911, and also in connection with the Red Cross department of the Northern Army during the War of the Revolution.

Such a work as this, providing as it does the means for enabling the Chinese in years to come to deal adequately with their own medical needs and problems, and also by the evidence it affords of the possibility and effectiveness of advanced union work by and in behalf of all Christian missions of the Reformed Churches, is worthy of very special attention, and is an abounding honour to the society which had the privilege of bringing it into being.

OTHER MEDICAL MISSIONS

Accounts of the Society's medical work, including that conducted at many important centres not mentioned in this issue of "The Chronicle," will be found in the Society's Annual Report. The following recent numbers of "The Chronicle" have also contained valuable articles on Medical Work, and a copy of any issue can be supplied for twopence, post free.

1913.	January.	Erode.
	„	May.
	„	July.
	„	August.
	„	September.
1914.	January.	Neyoor, etc.

Sunday School Notes On Matt. ix. 18-38

THE following notes form part of the new Graded Sunday School Lesson No. 10—written by Mrs. Eliot Curwen (formerly of Peking). The complete set of lessons for Senior, Junior, and Primary sections can be obtained from the Mission House, 16, New Bridge Street, London, E.C., for one penny post free.

Medical Missions

I. Their Object.—Show from lesson Christ's aim in healing the sick, viz.—

1. *The revelation of His love*—shown in (a) His readiness to respond; (b) going out of His way (ver. 19); (c) interrupted in His way (ver. 22, 27, 32); (d) seeking the crowds "about all the cities and villages" (ver. 35); (e) refusing no one (ver. 35).

2. *Winning hearts—leading men to believe in Him.*

"*Leaving us an example.*"—Find out what ideas the scholars have of a mission hospital. Make it clear that if the object of Medical Missions was only the healing of the body, the results could neither be durable nor widespread.

II. The Need.—1. Ignorance of the cause of disease and of its treatment in all heathen lands.

2. Bondage to evil spirits, arising out of ignorance of God.

In all non-Christian lands disease is supposed to be the work of an evil spirit, or else the punishment of some offended deity.

Africa.—When disease sweeps through a village in Africa, the people believe that an angry spirit is demanding victims, and that the epidemic can only be stayed by the offering to that evil spirit of human sacrifices; and this cure for disease is resorted to to-day throughout large tracts of inland Africa; where the people are not under the observation of European Government officials. The witch doctors, who are supposed to be acquainted with the secrets of the hidden world of spirits, acquire a mighty influence among the people. Their claim to their name and position is founded chiefly on the belief that they are themselves possessed by powerful evil spirits. Their functions are various. They are supposed to be able to interpret the minds of the spirits, and are ready to declare why certain "sick devils" are offended and to attempt to cast them out. The ordeal of "casting-out" is usually much worse for the patient than is the disease.

India.—We find in India that notwithstanding the splendid efforts put forth by the British Government to confer medical benefits on the people of that great Depen-

dency, the sorrowful fact remains that the Indian Government has only dealt yet with a very small percentage of the population of the Empire, e.g. in Calcutta, the largest Government medical centre in India, 6,000 persons, according to report, die annually without medical aid. If this is so, how great must be the need of the unnumbered towns and villages where there are no qualified medical men!

China.—Superstitions hold the bulk of the Chinese people in ignorance. Although they have had considerable knowledge in the use of drugs and in the art of massage, yet the belief, which they have held in common with all non-Christian lands, that evil spirits are the chief agents of disease and death, has led the Chinese doctor to practise his magic art more than to study medicine. Wherever he locates a pain, there, he believes, the evil spirit is active, and to get rid of that spirit is his chief consideration; hence he promptly punctures the spot with a long, and usually dirty, needle, sometimes finding it necessary to puncture the body in many places in succession, the eyeball occasionally being subjected to the same treatment. Needless to say such treatment is frequently followed by blood-poisoning and death. In 1911, when plague was rife in Manchuria, Chinese officials in a northern city posted up in public places the following remedies among others: (1) "On the 6th day of the 6th moon, gather horse-tooth vegetables, dry them in the sun and lay away until New Year's morning, then boil until done and pickle in brine and vinegar for one year. Partaking of this will prevent the current malady"! (2) "Take one piece of horse bone, wrap in red cloth; place in a small bag and wear it on the side of the body. Men should wear it on the left side and women on the right." A general whose arm was shattered by a ball during the war with Japan, thinking the daily dressing in Western style too slow a method, called in a fortune-teller. Prayers were written, on red paper, in big Chinese characters, then burnt and the ashes administered as medicine. The wound was left unattended, and the general died from blood-poisoning.

And so ignorance and superstition hold sway over the non-Christian world. Christ, the Mighty Physician, calls us to a Great Crusade in order to rescue the perishing. There is an appalling amount of suffering and misery in the world in this twentieth century that calls to us for comfort and healing. The cry of the children comes from all non-Christian lands. There are great dark spaces still where there is no hand stretched out to heal on behalf of Christ.

A Veteran Missionary

James Good
of Kanye

N EWS has reached the Mission House of the death on December 2, after a long and painful illness, of the Rev. James Good in his eightieth year. He has laboured as a missionary of the Society in South Africa for well-nigh forty years.

"Good of Kanye" was for a generation well known as one of the most faithful servants of the Mission in South Africa. He was born at Wakefield and became a member of the Congregational Church at Whitby. He received his special training as a missionary at the Seminaries at Bedford and Highgate.

Appointed to the South African Mission in 1864, he commenced his work at Griqua Town in Cape Colony. In 1871 he settled at Kanye as its first residential missionary, and there for upwards of thirty years he carried on missionary work amongst the Bangwaketsi. During the greater part of this time, Bathoen, one of the three chiefs who came to England in 1895, was a close friend of the missionary and the strong supporter of the church. Owing to failing

health, Mr. Good resigned in 1902 and took up his residence in Cape Town, where his widow, who has been his devoted helpmeet during his whole missionary career, still resides. One of his daughters is the wife of the Rev. Edwin Lloyd, of the Bechuana-land Mission.

The Rev. A. J. Wookey, of Vryburg, who for years was a colleague of Mr. Good in the mission, has sent the following reminiscences of his friend's settlement at Kanye.

Mr. Good has been called home after a long time of suffering. He first was at Griqua Town for a time, and became a good preacher in the Dutch language. He removed to Kanye, where he did splendid work among the Bangwaketsi tribe, leaving his mark on people and place. Forty-two years ago he and I built the first mission house on that station. We had arrived together with our wives and children, returning from a committee meeting at Molepolole.

Mr. Good had no shelter but his one waggon and a small tent. Things did not look very promising, but I suggested that I should stay with Mrs. Wookey and help him to put up a house. We, of course, had only our waggon. He readily agreed to the suggestion. With the native boys we had we set to work to lay the foundations of a house.

On the Sunday morning we went up to the town on the mountain for service. We met under the shade of a solitary tree at the chief's yard, and Mr. Good conducted his first service there. We were both beginners at the native language. The congregation was small and the people all heathen. The men brought their work with them to the service, in the shape of preparing wood for making native stools, and skins for braying or sewing.

On the Sunday afternoon the chief's son, Bathoen, came down to see our building. He at



Photo by]

REV. JAMES GOOD AND MRS. GOOD

[Barrar, Cape Town

once exclaimed that it would not do to build on the spot we had chosen, as springs of water would break out in the building itself on the first downfall of rain. So on Monday we removed to a better place, near the hill. The bricklaying was done with one trowel between us. A plumb-line was manufactured, the plumb itself being made by pouring melted lead into an empty eggshell embedded in clay, the shell giving it proper shape. A trader gave us some hints as to building the corner and breaking the courses of the bricks. Old packing-cases were made into doors, and unbleached calico served for glass in the windows. In a few weeks we had the walls built of a house 40 ft. by 14 ft. wide.

Mr Good's work progressed. A large congregation was gathered, a church built, numbers professed their faith in Christ, and were baptized. A school was opened, another church built, and thousands of people, old and young, came under Christian influences. When Bathoen became chief he at once commenced to work together with Mr. and Mrs. Good for the advancement of his people, and proved to be one of the best chiefs in the country.

Books to Read

Africa in Transformation

By Norman Maclean. (Nisbet. 5s. net. Post free 5s. 4d.)

"KIKUYU" is a word on every one's lips and in every newspaper in these days. If the reader requires a short account of the now world-famous Missionary Conference which was held there last June, written by a sympathetic outsider before the present controversy began, Mr. Maclean's book will give him such an account in a few graphic pages.

When the Conference was in progress the author was paying a visit to the Church of Scotland Mission in British East Africa, and it was his privilege to be present. He states that it was the most wonderful gathering he had ever seen, and in the book gives an admirable picture of what took place, quotes from the official documents, and gives an account of that celebrated Communion Service which has since been discussed in most of the newspapers of the world.

Mr. Maclean's fascinating book also deals with the romance of mission work in Nyassaland and Uganda. There is not a dull page in it. He pays an eloquent tribute to Livingstone as "the man who opened up Africa" and defends him from some of his critics. He severely comments upon the action of the London Missionary Society with regard to Livingstone. It is unfortunate that before writing his book he had not seen Dr. Wardlaw Thompson's article, published in connection with the Livingstone Centenary Celebrations, stating the true facts of the relations between the London Missionary Society and its great missionary.

The book is admirably printed and illustrated and will be read with great interest by all who are interested in the triumphs of Christianity in Darkest Africa.



Family Prayers

By a Layman

Robert Scott, 1s. net. Post free 1s. 2d. (May be obtained through the L.M.S.)

THIS little book is by Mr. W. H. Somervell, now on deputation for the L.M.S. in India with Mr. and Mrs. Lenwood. It consists of intimate prayers that can be used for morning intercession around the family altar; and includes, besides prayers suitable for any day, others for Christmas Day, New Year's Day, a birthday, and similar occasions.

The Chinese People

By the Venerable A. E. Moule, D.D. (S.P.C.K. 5s. net. Post free 5s. 4d.)

HERE is another useful handbook on China for the help of those who are engaged in the study of missionary problems. The writer bears a name honoured alike in China and in England; as the brother of the saintly Bishop G. E. Moule, of Mid-China, and of the present Bishop of Durham, and as himself a life-long China missionary and an Archdeacon of the C.M.S., he is equipped at all points for the authorship of a book on China.

In this work Archdeacon Moule deals with the general problems of China first of all. When Archdeacon Moule begins his description of the people and their customs, their religious art and history, he is on attractive ground, and his information is of deep value and extreme interest. The touch of personal knowledge and experience is evident on every page.

In his dealing with the modern religious history of China an undue emphasis on the work of the C.M.S. in particular will be manifest to those who know the work of other great societies, especially that of the great American Mission Boards, which are largely ignored; but the whole standpoint of the writer is that of an Anglican Church worker and his limitations as a writer of modern missionary history are those of his order. Beyond this one point, which needs to be made, the only word for this interesting and useful work is that of commendation.

N. B.

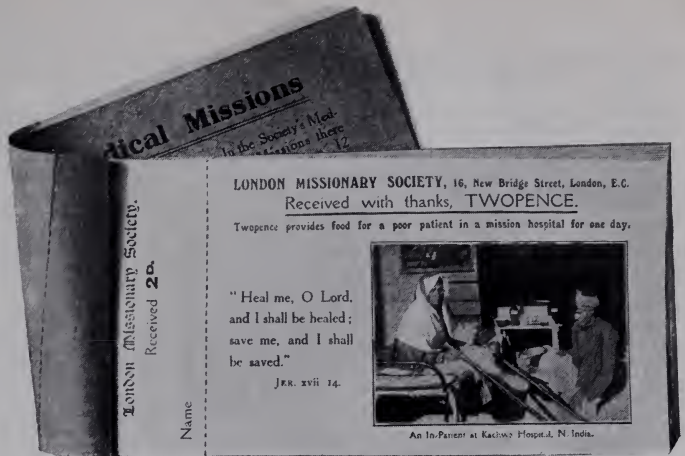


For God and China

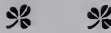
THIS ten-page leaflet is a memento of the late Mrs. Lavington Hart of Tientsin. The many friends and admirers of the work of the Anglo-Chinese College will welcome this brief sketch of the life-service of one who impressed her devotion and personality upon all who were brought into touch with her and who to-day is remembered by many young Chinese as the well-beloved agent of their conversion to faith in Christ. How her life was fashioned for the fuller service of China and in what a spirit of consecration Mrs. Hart delighted to spend and be spent for her Master is here told, fittingly and simply. Copies may be obtained at the Mission House upon receipt of 1d. to defray postage.

A New Collecting-Book for Hospital Week

A COLLECTING-BOOK has been prepared for use in connection with the forthcoming L.M.S. Hospital Week, of which very effective use may be made. It consists of thirty illustrated receipts for twopence each. It is specially intended for use by children and young people, and we anticipate that many inquiries will be made for it. The receipt form states that twopence will (a) provide food for a poor patient in one of our hospitals for one day, or (b) that it will suffice to meet the cost of a visit by one out-patient, or (c) that it supports the whole medical work of the Society for



fifteen seconds. Write to the Mission House for a number of these books, and see that they are put into circulation through the right agencies. This method of appeal sets the needs of our medical work in just that concrete fashion which is so desired by many of our friends.



Wants

THE portable organs asked for have been given by three friends; a splendid set of lantern slides by a boys' club; another by a missionary band; some more have been bought by a Summer School member out of profits from photos sold.

All these friends are heartily thanked for their generous and acceptable gifts.

The Misses Wilshaw, 78, Windsor Road, Forest Gate, E., have kindly offered to help me with the Wants. They are preparing patterns and lists of articles wanted by many missionaries in India and China, and they will be very glad to hear from leaders of Missionary Bands or from any friends who are willing to prepare parcels, or who are already doing so, with the name of the missionary for whom they are working.

We shall be very glad to know that fresh Bands are being formed, and new workers enlisted, as there is always a great demand for the many articles girls and boys can prepare.

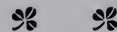
Dr. Wills, of Tsaoshih, Central China, will be very glad if some friend will give a *good* camera, for use by himself and the other missionaries in their work.

He also greatly needs some English concertinas for the Chinese evangelists to use in their work in the villages. These are extremely useful.

CLARA BENHAM.

A Students' Campaign

A NUMBER of the students of Lancashire College arranged and undertook the carrying through of a missionary campaign among the churches in the Burnley district on January 10, 11, and 12. They especially had in view the encouragement and the establishment of Study Circles and other forms of missionary work. The voluntary work for the Society and the cause of missions generally which is being done by the students of our colleges is a most gratifying feature of the collegiate life of to-day.



Corrections in the Report

BY a very unfortunate blunder on page 199 of the Annual Report, the Rev. H. Ll. Willett Bevan is made to report that the work has been "unsatisfactory." The word should be "satisfactory," and we hope that readers will make this correction in their copies of the Report. Mr. Bevan, as many will already know, has been obliged through family reasons to resign from the Mission and has settled in Australia.

Under the heading "Mangari," p. 94, it is stated that no report had been received. Mr. Theobald sent the report to the Mission House in good time, but it evidently did not arrive.

Watchers' Band Notes

MY DEAR FELLOW SECRETARIES,

We have again sent out the parcels of New Year's literature, and trust you will be able to get the returns in early in March, as we are anxious to have the report as complete as possible.

Some parcels have already been returned marked "Removed" and others have not been sent out, as I have been unable to ascertain if the Branches in question are still in existence.

Kindly let me know if your parcel has not arrived, and it shall be sent at once. The Week of Self-denial for the Medical Missions of our Society gives us a very definite subject for prayer this month. Shall we plead for a blessing on the givers and the gifts towards this most Christlike work?

May we indeed know more each day of what it is to be intercessory foreign missionaries, and, "ever bearing about in our body the dying of the Lord Jesus," labour in secret for the coming of His Kingdom on earth.

I am,
Yours in His Name,
F. E. REEVE.



New Branches

TOWN.	CHURCH.	SECRETARY.
Wincanton		Mr. E. Ivan Harris
Colchester	Headgate	Mr. Jno. Mathie
Liverpool	Garston	Mr. A. F. Barry
Bristol	Henleaze	Mr. W. H. Bywater
Birmingham	Small Heath	Miss J. Baggs
Cambridge	Emmanuel	Mrs. J. H. Rose



The Orient Club

OUR readers will be glad to hear that there is a movement on foot to interest the young men in our churches. A Club has been formed under the above name, which looks like "making good," and full particulars will be published in an early issue of THE CHRONICLE.

If, however, there are any young men whose patience is not equal to the strain of a month's delay, they can get all the information they want from the Secretary,

Mr. H. GORDON HOLMES,
60, Warrington Crescent,
Maida Vale,
London, W.

ANNOUNCEMENTS

Arrivals

Mrs. T. GILLISON and Miss S. NEEDHAM from HANKOW, C. CHINA, December 31.

Departures

Mrs. H. H. THEOBALD and child, returning to BABATPUR, NORTH INDIA, per steamer *China*, via MARSEILLES, December 11.

Rev. W. N. LAWRENCE, returning to PORT MORESBY, PAPUA, per steamer *Moldavia*, January 9.

Births

HALL.—At Rarotonga, on November 1, the wife of Percy H. Hall, of a daughter (Ruth Annie).

BENNEE.—On November 22, 1913, at Jammalamadugu, S. India, the wife of Archd. J. Bennee, M.B., Ch.B., of a son.

BAXTER.—On December 6, at Hong-Kong, to the Rev. and Mrs. Alexander Baxter, of Canton, a daughter (Edith Margaret).

TAYLER.—On December 7, at Tientsin, to Mr. and Mrs. J. B. Tayler, a son (Paul Bernard).

GORDON.—On December 14, to Mr. and Mrs. A. D. Gordon, of Tiger Kloof, a son.

Marriages

ALDOUS—McFARLANE.—On December 6, at St. Matthew's Church, Croydon, by the Rev. Walter Brown, vicar of St. Silas, Handsworth, Birmingham, uncle of bride, Frederick Gray Aldous, B.C.L.S., of Croydon, to Mary Ursula, only daughter of Dr. and Mrs. Sewell McFarlane, of N. China and "Winbrook," Croydon.

MITCHELL—PERKINS.—On December 11, at Ferme Park Chapel, Croydon, by the Rev. Chas. Brown, D.D., Isaiah Edward Mitchell, B.A., M.D., of Sherbrooke, Quebec, and of the London Mission, Hong-Kong, to Eleanor Whitworth Perkins, M.D., B.S., also of the London Mission, Hong-Kong, eldest daughter of William Perkins, of Llanberis, Crouch End, N.

YEAXLEE—LEADBEATER.—On December 18, at Westminster Chapel, London, by the Rev. R. Wardlaw Thompson, D.D., the Rev. Basil Alfred Yeaxlee, B.A., to Julie, only daughter of the late Thomas E. Leadbeater, M.R.C.S., and of Mrs. E. W. Moser, "Hebron," St. David's Road, Southsea.

LEITH—LENWOOD.—On December 18, at the London Mission Church, Madras, by the Rev. James Cooling, Rev. J. N. Devadasen and Rev. Frank Lenwood, Duncan Gordon Macnaughton Leith (Wesleyan Missionary Society), Madras, to Maida Lenwood (London Missionary Society), Madras, youngest daughter of the Rev. Walter Lenwood, Sheffield.

LONGMAN—GUTHRIE.—On December 31, 1913, at the Sanford St. Congregational Church, Swindon, by Rev. J. H. Gavin, B.D., Charles H. B. Longman, of Swindon and of Tientsin Anglo-Chinese College, London Mission, North China, to Amy Guthrie, of Swindon.

GOLDEN WEDDING

ASHTON—JOHNSTON.—At Nundyal, Cuddapah District, South India, on December 29, 1863, by the father of the bride, the Rev. John Perkins Ashton, M.A., of the London Mission, Madras, to Sarah Susan Johnston, second daughter of the Rev. R. D. Johnston, L.M.S., Nundyal. Present address: 44, Lower Park Road, Hastings.

Death

GOOD.—On December 2, at Rondebosch, Cape Town, James Good, formerly of Kanye, aged 79.



Prayer Meetings

The Monthly Prayer Meeting for Women will be held in the Board Room on Wednesday, February 18, at 3.30 p.m.

The next Prayer Meeting of the Metropolitan Auxiliary Council will be held on Monday, February 2, at 6 p.m.

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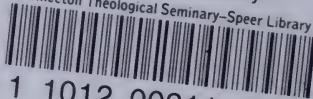
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